

Appendix B: Part I – CWS/Probation Cover Sheet

California's Child and Family Services Review System Improvement Plan	
County:	Sacramento
Responsible County Child Welfare Agency:	Sacramento County Department of Health and Human Services, Child Protection Division
Period of Plan:	July 1, 2009 – June 30, 2012
Period of Outcomes Data:	Quarter ending: Q1 2009
Date Submitted	December 15, 2009
County System Improvement Plan Contact Person	
Name:	Laura Williams
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Submitted by each agency for the children under its care	
Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Laura Coulthard
Signature:	
Submitted by each agency for the children under its care	
Submitted by:	County Chief Probation Officer
Name:	Don L. Meyer
Signature:	
Board of Supervisors (BOS) Approval	
BOS Approval Date:	12/1/09
Name:	See Attached Resolution
Signature	See Attached Resolution

RECEIVED DEC 28 2009

RESOLUTION NO. 2009-0915

FISCAL YEAR 2009-10 AND FISCAL YEAR 2011-12
SYSTEM IMPROVEMENT PLAN

BE IT RESOLVED AND ORDERED that the Chairperson of the Board is hereby authorized to sign the Fiscal Year 2009-2010 through Fiscal Year 2011-2012 System Improvement Plan on behalf of the COUNTY OF SACRAMENTO, a political subdivision of the State of California, and to do and perform everything necessary to carry out the purpose of this Resolution.

BE IT FURTHER RESOLVED AND ORDERED that the Director of the Department of Health and Human Services, or her designee, be authorized to make administrative amendments, assign, terminate, and/or amend the above plan, when necessary.

On a motion by Supervisor Nottoli, seconded by Supervisor Yee, the foregoing Resolution was passed and adopted by the Board of Supervisors of the County of Sacramento, State of California, this 1st day of December, 2009, by the following vote, to wit:

AYES:	Supervisors,	Dickinson, MacGlashan, Nottoli, Yee, Peters
NOES:	Supervisors,	None
ABSENT:	Supervisors,	None
ABSTAIN:	Supervisors,	None



In accordance with Section 25103 of the Government Code
if the State of California a copy of the document has been
delivered to the Chairman of the Board of Supervisors, County
of Sacramento on 12/1/09

V. Bolger
Deputy Clerk Board of Supervisors

Susan Potter
Chair of the Board of Supervisors
of Sacramento County, California

FILED
BOARD OF SUPERVISORS

DEC 01 2008

ATTEST:

Cyndi Lee
Clerk Board of Supervisors

BY

Cyndi Lee
CLERK OF THE BOARD

Overview

Background

The System Improvement Plan (SIP) is the final component of the California Child and Family Services Review (C-CFSR) required by SB 636 which in turn implemented federal requirements. This three year cycle starts with two years of planning activities—Self Assessment in year one and Peer Quality Case Review in year two. The Division of Child Protective Services (CPS) then creates the SIP in year three to implement specific improvements.

Sacramento County's FY 2009-10 through FY 2011-12 SIP is late. Originally due May 16, 2009, Sacramento received an extension to address recommendations from the Grand Jury and MGT Reports which were written in response to a spike in critical incidents.

Contents

The SIP contains two components.

Component	Topic	Link
1	SIP Narrative	Component 1 - Overview
2	CWS/Probation Matrix	Separate Document

There is an overview section in at the beginning of each component that describes the component's contents.

Component 1 - Overview

Contents

The 2009 SIP Part I Narrative begins with a chapter about the process used to create the SIP. Chapter 2 briefly presents the measures for which Sacramento has strong outcomes. Then, each outcome or strategic area in which Sacramento is underperforming is presented in its own chapter. Within these chapters, the following (when applicable) are discussed:

- Current status
- The linkage to other planning documents, e.g. the Peer Quality Case Review (PQCR), Self Assessment (SA)
- Designation of priority
- Relevant research
- Logical link between activities and outcomes
- Current activities
- New activities

The eleven chapters are shown below.

Chapter		Link
1	Process	Process
2	Strong Outcomes	Strong Outcomes
3	2B Timely Response to Referrals	2B
4	2C Timely Social Worker Visits with Child	2C
5	C1.1, C1.2, C1.4 Reunification	Reunification
6	C2.3, C2.4 Adoption	Adoption
7	C3.1, C3.2, C3.3 Permanency	Permanency
8	C4.1, C4.2, C4.3 Placement Stability	Placement Stability
9	Siblings Placed Together	Siblings
10	System Issues	System Issues
11	CWSOIP Funding	CWSOIP Funds

Continued on next page

Component 1 - Overview, Continued

Contents, Continued

Chapter		Link
	Attachments	#ATTD
	A. Executive Summary of the Self Assessment	
	B. Executive Summary of the Peer Quality Case Review	#ATTE

Purpose

The Department of Health and Human Services, Child Protective Services (CPS) Division, continues to implement systemic changes in accordance with California's Child and Family Service Review (C-CFSR) guidelines. The C-CFSR implemented a new outcome-based accountability system to measure each County's performance in providing child welfare services.

The current reporting cycle began with the submission of an updated Self-Assessment to the California Department of Social Services (CDSS) on March 17, 2009. The Self-Assessment provided an analysis of the County's performance as reported in the October 2008 Quarterly Report, and served as the foundation for the new three-year System Improvement Plan (SIP).

The SIP is an annual operational agreement between Sacramento County and the State, outlining the County plan for child welfare services improvement activities and focusing on areas identified as priorities for improvement in the County's Self-Assessment. It articulates a work plan that supports maximizing resources through an enhanced infrastructure while continuing the commitment to safety as the up most priority. Emphasis is placed on accountability through a system that builds in continuous quality improvement that is a fundamental component of the enhanced infrastructure.

Continued on next page

Component 1 - Overview, Continued

Purpose,
continued

The lead agency for completing the SIP is the Department of Health and Human Services, Child Protective Services (CPS) Division. The Probation Department is a contributing agency to the SIP and is responsible for assessing outcomes for children under its direct supervision, who also receive child welfare services.

Data source

The data source for these reports is the Child Welfare Services/Case Management System (CWS/CMS), reports from which are published by the California Department of Social Services in collaboration with University of California Berkley at http://cssr.berkeley.edu/ucb_childwelfare/RefRates.aspx.

Chapter 1 -- SIP Creation Process

Process

The priority outcomes and the strategies in the SIP address the findings and recommendations from recent reviews presented to the Board of Supervisors (BOS) that were completed by MGT of America and the 2008-2009 Grand Jury Report. Monthly progress reports are provided to the BOS on the activities occurring to address the recommendations. Several of the actions items in the SIP are in process and demonstrate efforts underway to address needed improvements.

Focus groups in March and April of 2009 with community partners reviewed the findings from the Peer Quality Case Review and the Self-Assessment Report and identified the SIP priority outcome areas. The feedback was provided from a wide range of participants with a wealth of knowledge. Participants included representation from parent leaders, mental health, law enforcement, foster family agencies, and Family Resource Centers.

The California Department of Social Services provided valuable consultation on the SIP during August and September of 2009.

Participants

The County of Sacramento, Departments of Child Protective Services and Probation extend sincere thanks to the following individuals, agencies for their participation in the System Improvement process. This System Improvement could not have been completed without the wealth of experience, knowledge and time generously given by so many individuals.

Roy Alexander	Sacramento Children's Home
Karen Alvord	Lilliput Children's Services
Shawn Ayala	Probation
Sue Bassett	Child Protective Services
Stacey Bell	Sacramento Unified School District Foster Youth Services
Lisa Bertaccini	Division of Mental Health
Terry Clauser	Child Protective Services
Judy Cooperrider	Child Protective Services
Laura Coulthard	Child Protective Services
Virginia D'Amico	Sacramento County Office of Education

Continued on next page

Chapter 1 -- SIP Creation Process, Continued

Participants,
continued

Mary DeSouza	Child Protective Services
Cheryl Douglas	Washoe Tribe Native TANF Program
Joni Edison	Child Protective Services
Tina Elarde	Child Protective Services
Lisa Faillers	Sacramento Children's Receiving Home
Eva Gower	Child Protective Services
Karen Habben	Child Protective Services
Mary Hargrave	River Oak Center for Children
Roderick Howze	Child Protective Services
Beverly Johnson	Lilliput Children's Services
Sharon Kramer	Probation
Marian Kubiak	Child Protective Services
Melinda Lake	Child Protective Services
Traci Lee	County Counsel
Jason Lindo	Alta Regional Center
Stephanie Lynch	Child Protective Services
Nancy Marshall	Child Protective Services
Chris McCarty	Sacramento Children's Home
Gina McGrath	Probation
Scott Moak	Lilliput Children's Services
Kathleen O'Connor	County Counsel
Stacy Orr	Child Protective Services
Karen Parker	Child Protective Services
Kim Pearson	Child Protective Services
Willie Peck	Foster Parent
Cheryl Penney	Child Protective Services, Parent Leader
Judy Pierini	Child Protective Services
Jeff Pogue	Specialized Treatment and Recovery Services (STARS)
Marianna Purdy	Child Protective Services
Carol Ramirez	Lilliput Children's Services
Jeff Reinl	Sacramento County Sheriff's Department
Harold Rowe	Probation
Abraham Samuel	Child Protective Services
Romeal Samuel	Child Protective Services
John Sargent	River Oak Center for Children, Family Resource Center

Continued on next page

Chapter 1 -- SIP Creation Process, Continued

Participants, <i>continued</i>	Sheila Self	River Oak Center for Children
	Melinda Shull	Probation
	Mary Tarro	Child Protective Services
	Myrna Terry	Sacramento County Foster Parent Association
	Lynn Thull	LMT Consulting
	Luis Villa	Child Protective Services
	Stephen Wallach	Child Protective Services
	Nichole Wentzel	Child Protective Services, Parent Leader
	Julie Zawodny	Child Protective Services

Chapter 2 –Strong Outcomes

Child safety Sacramento CPS does well on two of the four safety outcomes.

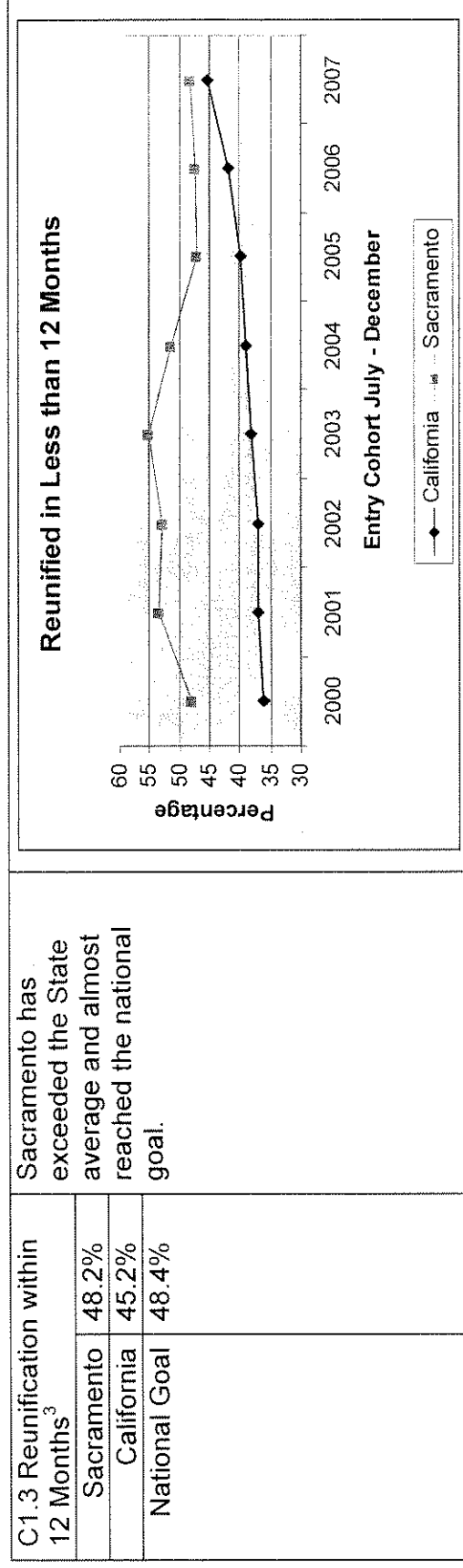
<p>S1.1 No Recurrence of Maltreatment</p> <p>Sacramento 93.2%¹</p> <p>California 93%</p> <p>National Goal 94.6%</p>	<p>Sacramento has an improving trend since 2004, even exceeding the State average and the National goal in 2007. Priority activities in the SIP matrix will lead to continued improvement.</p>	<p>S1.1 No Recurrence of maltreatment in Next 6 Months</p> <p>January - June</p> <p>Legend: California (dashed line with squares), Sacramento (solid line with diamonds)</p>
<p>S2.1 No Maltreatment in Foster Care</p> <p>Sacramento 99.74%²</p> <p>California 99.63</p> <p>National Goal 99.68%</p>	<p>Sacramento has an improving trend since 2005, exceeding both the State average and the national goal in 2008. Priority activities in the SIP matrix will lead to continued improvement.</p>	<p>No Maltreatment in Foster Care</p> <p>Calendar Year</p>

¹ Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website http://cssr.berkeley.edu/uch_childwelfare/SIM1.aspx

² Ibid http://cssr.berkeley.edu/uch_childwelfare/S2M11.aspx

Chapter 2 –Strong Outcomes, Continued

Reunification Sacramento has a strong outcome on one of the four reunification measures



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³ Ibid http://cssr.berkeley.edu/ucb_childwelfare/CJM3.aspx

Chapter 2 –Strong Outcomes, ContinuedContinued

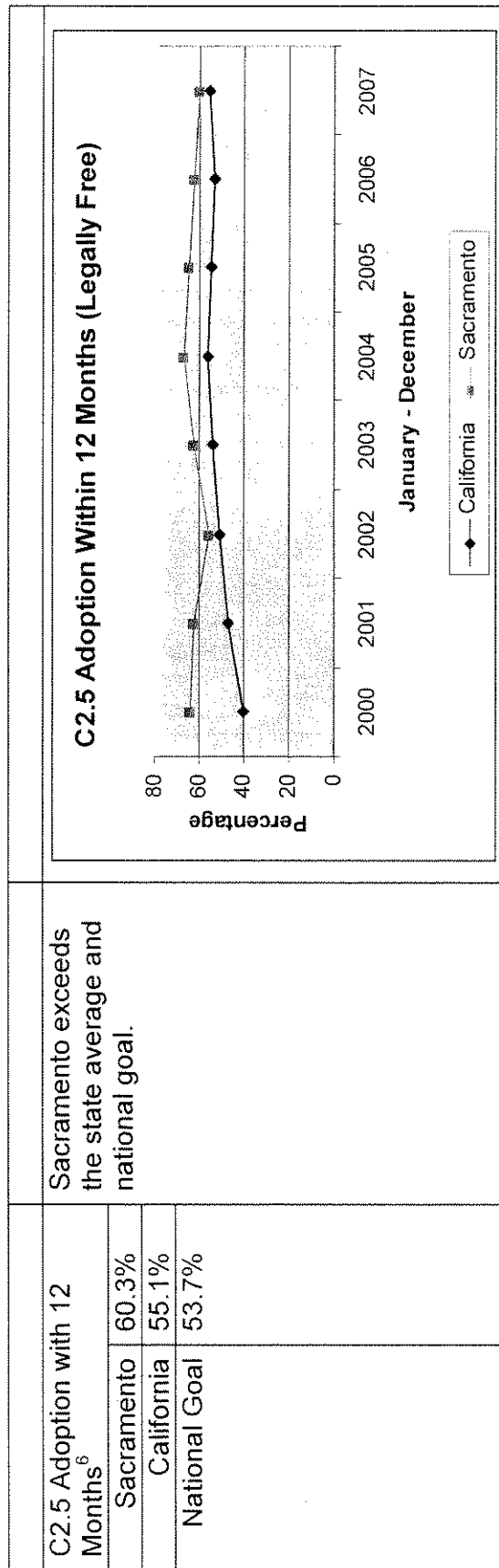
Adoption Sacramento has strong outcomes on three of the five adoption measures.

C2.1 Adoption within 24 Months ⁴	Sacramento exceeds the state average and national goal.	<div>C2.1 Adoption Within 24 Months</div> <table><thead><tr><th>Year</th><th>Sacramento</th><th>California</th></tr></thead><tbody><tr><td>2000</td><td>25</td><td>25</td></tr><tr><td>2001</td><td>28</td><td>28</td></tr><tr><td>2002</td><td>32</td><td>32</td></tr><tr><td>2003</td><td>38</td><td>38</td></tr><tr><td>2004</td><td>45</td><td>40</td></tr><tr><td>2005</td><td>45</td><td>42</td></tr><tr><td>2006</td><td>48</td><td>45</td></tr><tr><td>2007</td><td>50</td><td>45</td></tr><tr><td>2008</td><td>50</td><td>45</td></tr></tbody></table>	Year	Sacramento	California	2000	25	25	2001	28	28	2002	32	32	2003	38	38	2004	45	40	2005	45	42	2006	48	45	2007	50	45	2008	50	45
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C2.2 Median Months to Adoption ⁵	Sacramento exceeds the state average and national goal.	<div>C2.2 Median Months to Adoption</div> <table><thead><tr><th>Year</th><th>Sacramento</th><th>California</th></tr></thead><tbody><tr><td>2000</td><td>40</td><td>40</td></tr><tr><td>2001</td><td>38</td><td>38</td></tr><tr><td>2002</td><td>35</td><td>35</td></tr><tr><td>2003</td><td>32</td><td>32</td></tr><tr><td>2004</td><td>30</td><td>35</td></tr><tr><td>2005</td><td>32</td><td>35</td></tr><tr><td>2006</td><td>35</td><td>38</td></tr><tr><td>2007</td><td>35</td><td>38</td></tr><tr><td>2008</td><td>35</td><td>38</td></tr></tbody></table>	Year	Sacramento	California	2000	40	40	2001	38	38	2002	35	35	2003	32	32	2004	30	35	2005	32	35	2006	35	38	2007	35	38	2008	35	38
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⁴ Ibid http://cssr.berkeley.edu/ucb_childwelfare/C2M1.aspx

⁵ Ibid http://cssr.berkeley.edu/ucb_childwelfare/C2M2.aspx

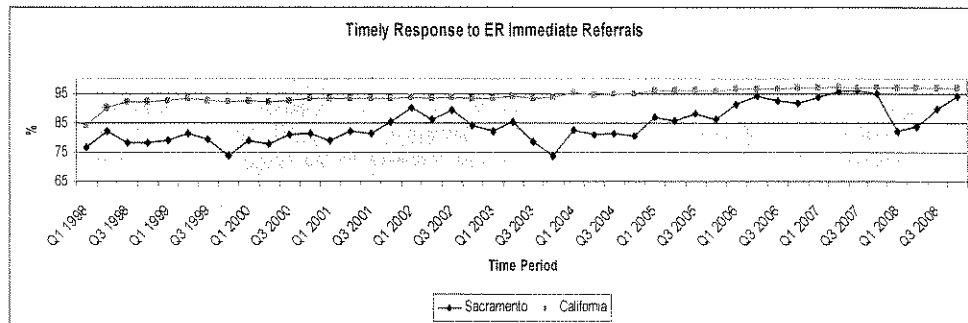
Chapter 2 –Strong Outcomes, Continued



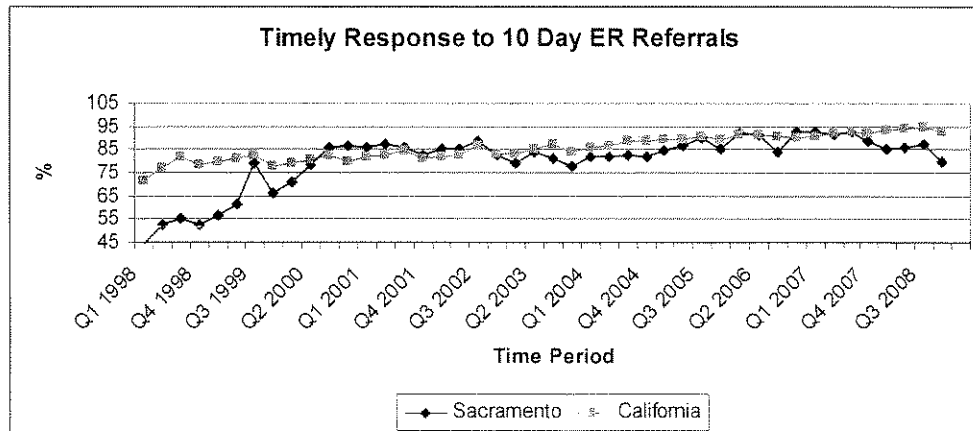
⁶ Ibid http://cssr.berkeley.edu/ucb_childwelfare/C2M5.aspx

Chapter 2 -- 2B Timely Response to Referrals – Immediate and 10 Day

Current status Sacramento CPS is currently below the State average for timely response to emergency response **immediate referrals**. Sacramento has uniformly been below the State average. The 2008 first quarter's drop is recovering, but Sacramento is timely 93.9% compared to California's 96.9%



Sacramento had exceed California's **10 day** timely response for the last quarter of 2006 and the first of 2007 but then slipped sharply with particularly low timeliness in the fourth quarter of 2008 with 79.5% compared to California's 92.7%



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Chapter 2 -- 2B Timely Response to Referrals – Immediate and 10 Day, Continued

Current activities

Program improvements have been made to address this outcome:

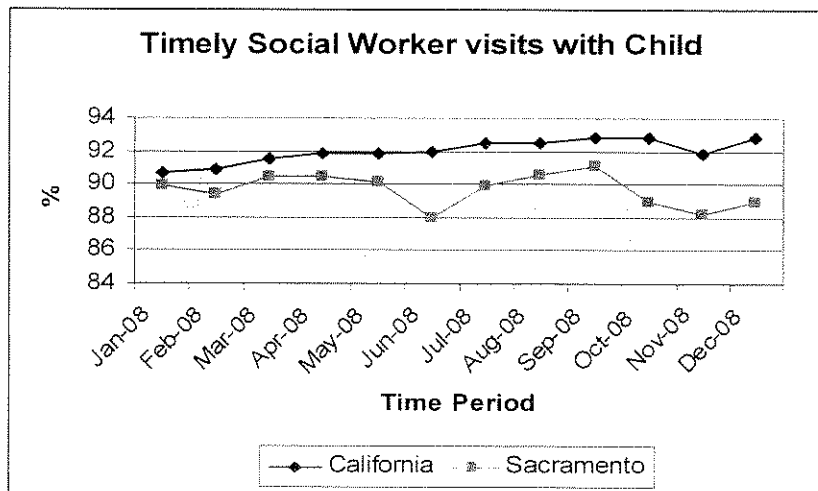
- Out-stationed locations,
 - Addition of a second shift,
 - Addition of weekend shifts.
-

New activities

Further improvement is anticipated to come from supervisors' increased usage of SafeMeasures to monitor staff performance for referral response time. Managers report these statistics weekly on a phone call with the Deputy Director and Division Managers. See Strategy 7 in the SIP priority matrix.

Chapter 3 -- 2C Timely Social Worker Visits with Child

Current status California's average for timely social worker visits with the child for 2008 is 92.0%. Sacramento's annual average is 89.7% with December 2008 being 88.9% which is below California's percentage of 92.8 for the same period.



New activities Managers report these statistics weekly on a phone call with the Deputy Director and Division Managers. See Strategy 7 in the SIP priority matrix.

Chapter 4 -- C1.1 Reunification Within 12 Months

C1.2 Median Time to Reunification

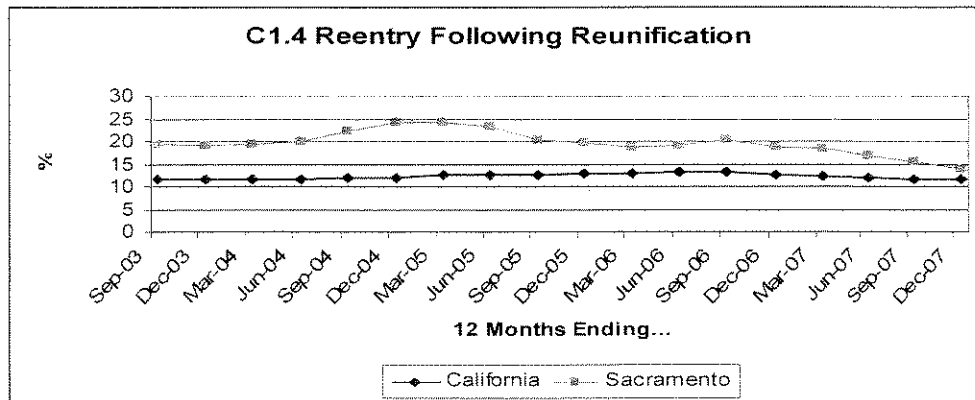
C1.4 Reentry Following Reunification

Current status

As of December 2008, Sacramento falls below the national standard on these three outcomes although it performs better than the State on reunification within 12 months and median time to reunification. However, Sacramento has a worsening historical trend for reunification within 12 months, down from a high of 76.3% for the 12 months ending 6/30/05. Sacramento has steadily been decreasing the median months to reunification starting with the 12 months ending 3/31/08.

Outcome	National Goal	California Actual	Sacramento Actual
C1.1 Reunification Within 12 Months	75.2%	61.9%	70.5%
C1.2 Median Time to Reunification	5.4 months	8.5 months	5.7 months
C1.4 Reentry Following Reunification	9.9%	11.6%	14.0%

While remaining higher than the State, Sacramento has been steadily reducing its reentry rate since the twelve months ending in 12/31/06.



Links to other documents

The July 2009 PIP encourages "expand use of participatory case planning strategies," e.g. TDMs. 2009 SA's Quality Assurance System area of need is "Community participation in TDM meetings should be increased."

Continued on next page

Chapter 4, Continued

Designation of priority	Improvement in this strategy is a priority. See strategy 9 in the SIP Priority matrix.
Relevant research	<p>"These key factors associated with re-entry include the following:</p> <ul style="list-style-type: none">• Placement instability• Children placed with non-relative foster care• Parental mental illness, substance abuse or poverty• Previous failed reunification attempts• Parental ambivalence about reunification• Children with behavioral or health difficulties• Predominant placement⁷"
Logical link between activities and outcomes	TDMs will strengthen collaborative relationships among CPS, parents, youth, resource parents, and other partner. This collaboration gives families a greater sense of support, improves communication, and makes problem solving more effective.
Current activities	TDMs are now conducted to stabilize placements as the worker sees the need. TDMs at the time of removal are being tested.
New activities	The Division's emphasis on increased TDMs at the time of removal, before reunification, and when placement stability is threatened will lead to more reunifications within 12 months as well as reduced reentry to care. Implementation of the Placement Unit will ensure that TDMs are conducted at these points in the case.

⁷ *Preventing Re-entry into the Child Welfare System: A Literature Review of Promising Practices*, Holly Hatton, M.S. and Susan Brooks, M.S.W., November 2008, Northern Training Academy Supporting Children and Family Services, page 7, <http://www.childsworld.ca.gov/res/pdf/PreventingRe-entry.pdf>

Chapter 5 -- C2.3 Adoption within 12 Months (17 Months in Care)

C2.4 Legally Free Within 6 Months

Current status	<p>Sacramento struggles with only 2 of the five adoption outcomes:</p> <ul style="list-style-type: none">• For adoption within 12 months, Sacramento's trend is positive. However, it is 5 points below the national standard, and 2 points below the California average.• For legally free within 6 months, Sacramento's data for calendar year 2008 is 4.8%, well below California's 7.1% and the national goal of 10.9%.
New activities	<p>Unfortunately, the July 2009 lay off of 18.6 FTE adoption workers⁸ will prevent further improvement on this outcome. This staffing cut eliminates county overmatch funding in this State responsibility program.</p>

⁸ 13.6 social workers, 1 paralegal, 2 office assistants, and 2 supervisors

Chapter 6 -- C3.1 Exits to Permanency (24 Months in Care)

C3.2 Exits to Permanency (Legally Free at Exit)

C3.3 In Care 3 Years or Longer (Emancipated)

Current status The data for the 12 months ending 12/31/08 reveal underachievement in all three of the permanency outcomes.

Outcome	National Goal	California Actual	Sacramento Actual
C3.1 Exits to Permanency	29.1%	22.5%	19.4%
C3.2 Legally Free at Exit	98%	96.8%	95.7%
C3.3 In Care 3 Years or Longer	37.5%	60.8%	63.2%

Sacramento does have a positive trend line for the first and third outcome, but a negative one for legally free at exit.

Current activities The July 2009 lay off of 18.6 FTE adoption workers⁹ will prevent further improvement on these outcomes. This staffing cut was to eliminate county funding in this State responsibility program. While increased TDMs may lead to additional permanency exits, the gain will be offset by the loss in adoption exits.

New activities No new activities are planned.

Chapter 7 -- C4.1- C4.3 Placement Stability

Current status The data for the 12 months ending 12/31/08 reveal underachievement in all three of the placement stability outcomes.

Outcome	National Goal	California Actual	Sacramento Actual
C4.1 Placement stability (8 days- 12 months)	86%	82.2%	78.5%
C4.2 Placement stability (12-23 months)	65.4%	62.3%	46.8%
C4.3 Placement stability (24+ months)	41.8%	33.4%	22.9%

Sacramento does show an improving trend, though, for the first two indicators.

Link to other documents Placement stability is a focus of July 2009 **PQCR**. Relevant findings include 1) the need to collect relative information by the initial case worker and to record it in CWS/CMS. 2) TDMs increase workload via a referral form and documentation of the action plans. The July 2009 **PIP** encourages "expand use of participatory case planning strategies," e.g. TDMs.

Designation of priority C4.1 Placement Stability for those in care between 8 days and 12 months is a priority outcome. See Strategy 8 in the SIP matrix for more detail.

C4.2 and C4.3 were dropped because children who already had three or more moves would continue to appear in the denominators of these outcomes. Rather, the Division focused on C4.1 (Stability for 8 days to 12 months) because intervention is still possible to prevent a third placement. However, it is Division policy to hold a TDM prior to a placement change in hopes of preventing a disruption or finding relatives with whom to place.

Continued on next page

Chapter 7, Continued

Relevant research	<p>"Growth in kinship care has increased considerably in order to sustain permanency planning since the Adoption and Safe Families Act of 1997. Some research finds that children placed in kinship care fare better than children placed in foster care. Though not a heavily studied topic, research finds that children placed with kin experience fewer moves, with one study finding that kinship placements had a 70 percent lower rate of disruption than non-kin placements (Webster, Barth, & Needell, 2000). The contributing factors for why children placed with kin tend to do better is because they are more likely to remain in the same neighborhood, be placed with siblings, and have consistent contact with their birth parents as compared to children in foster care, and these contributing factors are believed to lead to more positive outcomes for children because there are less disruptions in the child's life¹⁰." "The first 6 months of initial placement is the greatest time with which children experience disruption, with 70% of disruptions occurring during this time and infants experiencing more disruptions during the first month of initial placement"¹¹.</p> <p>"</p>
Logical links between activities and outcomes	<p>Sacramento plans to use TDMs at the front end to insure relatives have been considered as a placement. Hopefully, some TDMs can be held within 23 hours of removal so a child will not be placed in the Receiving Home. TDMs will also be held before any placement change is made to try to stabilize the current placement, or, if a placement change is needed, to place with relatives.</p>
Current activities	<p>TDMs are now conducted to stabilize placements as the worker sees the need.</p>

Continued on next page

¹⁰ A Literature Review of Placement Stability in Child Welfare Service: Issues, Concerns, Outcomes and Future Directions, The University of California, Davis, Extension The Center for Human Services, August 2008, page 8, <http://www.childsworld.ca.gov/res/pdf/PlacementStability.pdf>

¹¹ A Literature Review of Placement Stability in Child Welfare Service: Issues, Concerns, Outcomes and Future Directions, The University of California, Davis, Extension The Center for Human Services, August 2008, page 10, <http://www.childsworld.ca.gov/res/pdf/PlacementStability.pdf>

Chapter 7, Continued

New activities	All new placements and placement changes will be done through the Placement Unit which will insure relatives are considered and TDMs are held. As of August 2009, this process is being piloted.
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Chapter 8 -- 4A Siblings Placed Together

Current status As of January 1, 2009, Sacramento lagged the State in placing children with all or some of their siblings.

Outcome	California	Sacramento
Placed with All Siblings	51.6%	45.6%
Placed with Some or All Siblings	71.6%	66.9%

Sacramento continues to show continued improvement over the last 4 years measured for these two outcomes.

Link to other documents The July 2009 PIP encourages "expand use of participatory case planning strategies," e.g. TDMs.

Current activities Increases in kin placement through TDMs and documenting relatives in CWS/CMS will contribute to this improvement.

New activities The Division expects that increased TDMs at removal and when placement stability is threatened will contribute to this positive trend.

Chapter 10 – System Issues

Background In response to an unusually high number of critical cases, MGT and the Sacramento County Grand Jury issued reports in the Spring of 2009 intended to strengthen the Division's infrastructure. Naturally, implementation of these recommendations is a priority and thus they have been incorporated into the SIP Matrix as System Issues.

System issues The recommendations from the two reports have been grouped into the following seven strategies:

1. All employees will receive a formal performance evaluation on a regular basis
2. Increase worker retention
3. Reformat and consolidate existing policies and procedures
4. Implement an automated service referral system
5. Embed data analysis in management decisions
6. Obtain stakeholder participation in the Peer Quality Case Review, Self Assessment, and System Improvement Plan
7. Safety assessments shall be done timely and correctly

Attachment C – Board of Supervisors Progress Reports 8/18/09

Chapter 11 – CWSOIP Funds

Amount The Child Welfare Services Outcome Improvement Plan (CWSOIP) fund expected fund allocation for Fiscal Year 2009-10 is \$872,801 which draws down \$648,023 in Title IVE funding for a total of \$1,520,824.

The Probation Department has estimated that approximately \$92,800 in CWSOIP funds will be available.

CPS CPS plans to use the CWSOIP funding for:

- The Placement Support Unit (PSU)
- Kin support
- Multi-Discipline Resource Team (MRT) case reviews with Differential Response providers
- Funding nursing consultation and support

The first two activities directly support high priority strategies to increase placement stability by increasing the number of kin placements. The new PSU assumes placement responsibility from the case carrying social worker. It employs a second shift worker who can make emergency placements with relatives. The PSU also arranges TDMs which often selects kin placements. Licensing provides a weekly orientation for prospective kin, discussing the clearance process and providing resource information. Seven workers are dedicated to kin assessment.

First 5 has assumed funding for CPS' differential response network, freeing up these funds to support the CPS workers' attendance at MRT meetings with the differential response providers. These meetings are essential to coordinate assessment and service delivery. Sixteen Family Maintenance workers each attend MRTs twice a month

Finally, CPS has co-located CHDP and public health nurses in its service units to facilitate coordinated assessment and case planning.

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Attachment C – Board of Supervisors Progress Reports 8/18/09

Chapter 11 – CWSOIP Funds, Continued

Probation

The Probation Department has estimated that approximately \$92,800 in CWSOIP funds will be available. The Probation Department intends to utilize these funds to enhance the professional development of placement staff in the areas of permanency, family finding, and independent living skills, in order to positively impact the lives, and enhance the sense of permanency, of minor's placed through the Delinquency Court.

Specific targeted areas:

- Placement specific training of placement staff. This may include travel expenses, lodging, registration fees, materials, etc
- Funds will also be used to pay for the procurement of documents for minors such as birth certificates, California ID, Social Security Cards, etc.
- Purchase family finding software and related training to assist placement officers in locating potential family members with whom to place minors
- Probation will also explore the possibility of developing an in-house Independent living program (ILP) to assist minors with the necessary information and skills to live independently. The CWSOIP Funds could be used to support the development and implementation of an ILP program.

Through the use of the CWSOIP funds, the Probation Department can fulfill the objectives identified above and ultimately provide a greater level of service to delinquent minors placed in foster care placements. Minors placed through the Delinquency Court will have the opportunity to increase their skills and knowledge necessary for a successful transition back into the community and enhance long-term familial relationships.

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

SECTION 5 – SELF-ASSESSMENT SUMMARY

Sacramento County remains committed to continuous outcome improvement for children and families. CPS and Probation continue to build upon already strong collaborations with community partners. The process of improvement must include acknowledgement of challenges, including high caseloads and the current economic crisis. Nevertheless, it is the responsibility of CPS and Probation to continuously strive to improve outcomes for youth and families, guided by evidence-based practices and data.

The purpose of this section is to summarize and analyze the County's performance on each of the C-CSFR outcomes as well as discuss the impact of any systemic factors affecting these performance outcomes.

- **Safety Outcomes –**

Related C-CSFR outcomes are: children are, first and foremost, protected from abuse and neglect; children are maintained safely in their homes whenever possible and appropriate; and children receive services adequate to their physical, emotional and mental health needs.

Outcome Indicator S1.1 - No recurrence of maltreatment

Children *not* experiencing recurrence of maltreatment was a priority outcome area in the 2006 System Improvement Plan. Improved performance was achieved and was reflected in the statistics for this indicator. During the period April 2007 through March 2008, Sacramento County exceeded the National standard of 94.6% and exceeded the 92.9% rate for the State overall. Since March 2008, however, there have been a significant number of child abuse deaths in the County. While not all of the families were known to Sacramento County CPS prior to the children's deaths, immediate action has been taken to examine whether any gaps in practice, policies, or services may have affected the lives of these families.

Early intervention and prevention strategies and collaboration with community partners are priorities that will continue in CPS. SDM remains a primary tool for safety and risk assessment and refresher training will continue to be available to staff on an on-going basis to ensure a high level of efficacy in critical decision-making. Additionally, CPS is seeking ways to make SDM training more effective. Internal review of current policies and procedures, actual practice, and systemic factors will continue, as well any needed corrective actions. CPS procedure revisions have not kept pace with practice changes. Concerned and knowledgeable community members convening as the CPS Oversight Committee conduct reviews of critical cases and provide practical recommendations to the Board of Supervisors and CPS; in addition, a consulting firm has been contracted to examine current policies and procedures and provide recommendations for improvement to CPS.

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

Outcome Indicator S1.2 – No maltreatment in foster care

Sacramento County has remained consistent and very close to the National standard in this outcome area since 2003. The National standard is that 99.68% of children do not experience abuse or neglect in foster care. Sacramento County's results were 99.5% for the period April 2007 through March 2008.

The high standard in this area will be maintained through continuing collaborative efforts and by the use of tools such as TDM and family and youth engagement. Community collaborators affecting this outcome include, but are not limited to, the Kinship Support Services Program (KSSP), the Foster Parent Association, Foster Family Agencies, and many other care providers.

Outcome Indicator 2B - Timely response to referrals

The rate of timely response to both immediate-response (IR) and ten-day response referrals has declined in recent quarters to less than the 90% compliance standard. High caseload demands and human resource issues have been significant barriers to timely response.

Managers and supervisors are increasing use of the Immediate Response Information System (IRIS) to monitor compliance for first contact on IRs, and increasing use of SafeMeasures to monitor compliance for first contact on ten-day referrals. The use of the SDM Hotline tool increases consistent selection of the appropriate time and mode of response.

Outcome Indicator 2C - Timely social work visits / monthly contacts

Compliance with timely visits has decreased. In the most recent reported period, timely visits were below the 90% compliance standard. High caseloads, human resource issues, loss of local placement opportunities and CWS/CMS data integrity issues negatively impact this outcome.

Efforts to impact this outcome include geographic assignment of cases, increased compliance monitoring through SafeMeasures, and continuing CWS/CMS training. To further impact this outcome, in 2009, CPS is examining expanding geographic assignment across CPS programs.

• Permanency Outcomes –

Related C-CSFR outcomes are: children have permanency and stability in their living situations without increasing reentry to foster care; the family relationships and connections of the children served by CPS and Probation will be preserved, as appropriate; and children receive services adequate to their physical, emotional and mental health needs.

Outcome Indicators C4.1, C4.2, C4.3 – Placement stability

For all placement stability measures, Sacramento County is performing below the National standard. Placement stability is defined as having two or fewer placements while in care.

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

Focus group participants stressed that CPS' practice of placing children initially in a temporary placement, usually at the Children's Receiving Home of Sacramento, pending the identification of a more permanent kin or other foster placement heavily impacts placement stability outcomes. Another issue affecting performance is the fact that more dependents are placed with non-related resource parents than in relative homes, which statistics indicate are more stable. Additional factors considered to hamper performance were limited ability to provide early comprehensive assessments of children's strengths and needs, human resources issues affecting ability to adequately match children with care providers, limited resource homes and respite care for children with special needs. Focus group members specifically identified additional resources for the existing Placement Support Unit within the Foster Home Licensing Bureau as a need.

Strategies in place to address placement stability include: TDMS, improved early identification of kin, increased kin supports and training, enhanced PRIDE curriculum and support groups, the Children's Receiving Home Assessment Center, and maintaining children in their school of origin whenever possible. A placement stability workgroup that will include community partners is scheduled to begin in 2009.

Outcome Indicator 4B – Placement type; least restrictive setting

Improvement is still needed in these measures. Sacramento County continues to place more youth with non-related resource parents than in the least restrictive setting of relative homes; and more youth in Foster Family Agency certified homes than in the less restrictive county-licensed resource homes. However, during the past three years fewer Sacramento County youth have experienced group home facility placements.

In these past few years the development of the Kinship Support Services Program has helped stabilize kin placements and recruit potential relative resource parents. In 2008, a swing-shift kinship assessment position was developed and co-located with Dependent Intake staff. Early identification of relatives available to accept placement and placement in relative homes will continue to be a priority.

Outcome Indicator C1.1 - Reunification within 12 months

Performance has decreased for this measurement of time to reunification. During the most recent reporting period the median time to reunify in Sacramento was 7.7 months which does not meet the national standard of 5.4 months, but is slightly better the state median of 8.0 months. Factors negatively impacting these performance measures are: lack of specific services for families including culture and language services and services in specific neighborhoods; human resource issues; and lack of aftercare services.

Strategies that serve to improve performance in this measure include: family and youth engagement; increased family visitation; TDMS; expansion of community partnerships including STARS, Drug Dependency Court, Early Intervention Family Drug Court and Family Resource Centers; Parent Leaders and Resource Parent Leaders; enhanced PRIDE curriculum; enhanced parent orientation; geographically located parenting classes; and the parent support line. Additionally, in 2008, CPS joined with the Juvenile Court to

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

participate in the Casey Family Breakthrough Series Collaborative on Timely Reunification and will be developing strategies to impact this outcome, as well as foster care re-entry.

Outcome Indicator C1.4 – Reentry following reunification

Sacramento County is making progress towards meeting the National and State standards in this measure, but still must improve to meet the standards. During the most recent period, the County's rate of reentry following reunification was 15.8% while the rate for the State overall was 11.1% and the National standard is 9.9%.

Focus group participants identified the development of comprehensive sustained support plans for families at the time of reunification as the single most significant factor in reducing reentry. Related key strategies include partnering with mental health services as well as the use of TDMs.

Barriers to better performance are: inadequate availability of aftercare services; lack of comprehensive sustained support plans; and inability to delay reunification in some cases when the family or youth would benefit from a more gradual withdrawal of CPS or Probation support.

Outcome Indicators C2.1, C2.2, C2.3, C2.4 and C2.5 – Time to adoption

Overall, the County's performance in time to adoption outcomes continues to be above the National standard with the exception of the standard for "children legally freed in 6 months".

Concentrated efforts to increase permanency by finalizing adoptions timely have included collaborations with partners such as Sierra Adoption and Lilliput. Enhancing concurrent planning practices has also positively impacted these outcomes. In January 2008, the practice of requiring an approved adoption home study prior to placement of any child birth to 3 years of age was implemented. This practice speeds adoption whenever adoption is ordered as the permanent plan for any infant or toddler.

Barriers that were cited included court continuances and placement changes by the court. Another factor impacting these measures is the County's success in finding adoptive homes for older youth who have been in care for some years. While reflective of the value that every child deserves a permanent home, the County's success in the Destination Family Program, in collaboration with Sierra Adoptions, skews the time to adoption performance measures.

Outcome Indicators C3.1, C3.2 and C3.3 – Exits to permanency

Sacramento County is making progress towards the National standard in these outcome areas. Strategies that have been successful in improving County performance in these measures include: the Ruby Slippers Project, a multifaceted project that included education of staff and partners regarding the importance of permanency; Destination Family and CapKids are Waiting, two collaborations with Sierra Adoptions that find permanency for youth who may be difficult to place; and shared leadership including

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

Youth Leaders, Parent Leaders and Resource Parent Leaders. All efforts to stabilize placements and support resource parents including kin have positive impact on these measures. Collaborations with, but not limited to, Casey Family Programs and the LaVerne Adolpho Housing Program have been effective in providing some of the much needed resources for emancipated youth, including transitional housing.

Barriers have included: the time investment necessary to find permanent connections through family-finding; lack of aftercare for emancipating youth; the difficulty in maintaining continuity in meeting youths' educational needs when multiple placement changes occur; and placement stability issues.

- **Well-being Outcomes –**

Related C-CSFR outcomes are: the family relationships and connections of the children served by CPS and Probation will be preserved, as appropriate; children receive services adequate to their physical, emotional and mental health needs; children receive services appropriate to their educational needs; families have enhanced capacity to provide for their children's needs; youth emancipating from foster care are prepared to transition to adulthood.

Outcome Indicator 4A - Siblings placed together

Since 2005, there has been an increase in siblings placed together. CPS, including the Placement Support Unit, and FFA partners, have made it a priority to place siblings together whenever possible. Maintaining sibling placements is also done through support from KSSP and TDMs.

Challenges to this measurement include regulatory resource home capacity limits when large siblings groups must have placement, the difficulty of maintaining some sibling groups when one or more members have complex mental health or behavioral issues, and financial disincentives for those few sibling sets who may not eligible for regular foster care funding.

Outcome Indicator 4E – Indian Child Welfare Act (ICWA)

Strategies implemented since 2005 have resulted in increased placement of Native American youth with relatives and decreased placement of these youth in resource homes that are not Native American. However, attention is still needed to improve early tribal identification, to recruit additional Native American resource homes, and to improve CWS/CMS documentation of resource parents' ethnicity.

The County's improved numbers in this outcome measure may be attributed to the development of collaborations that continue with the Native American community, an increased focus on ICWA training for CPS staff, and an increased focus on recruitment of culturally competent resource homes.

Outcome Indicator 8A – Youth transitioning to adulthood

In the year ending September 30, 2007, participation in the Sacramento County Independent Living Program (ILP) increased. Additionally, more of these youth

Attachment A – Summary of Self Assessment

SACRAMENTO COUNTY SELF ASSESSMENT 2009

enrolled in higher education and more completed vocational training. However, in the same period, the number of Sacramento County ILP youth achieving their high school diplomas and the number who achieve employment or other means of support decreased. Still, Sacramento County's performance in these last two measures exceeded the State's performance during that same time period.

Sacramento County has been successful in initiating more timely referrals of youth to the ILP, the implementation of Girl Power, an increasingly effective collaboration with education partners, and the use of Youth Leaders to advocate for youth. Additionally, the development of transitional housing resources has been helpful.

Barriers to successful transition of youth include: the need for aftercare services, including more transitional housing and mental health services; placement stability issues that interfere with continuity of connections, ILP case management and education services; and the need to initiate preparation for emancipation at an earlier age.

In Conclusion

This self-assessment is the basis for identifying the priority improvement areas for the 2009 System Improvement Plan (SIP) for Sacramento County CPS and Probation. The Peer Quality Case Review completed in May 2008 was helpful in the formation of this self-assessment and the information obtained from it is incorporated into this report. This assessment also considered progress made since the previous SIP, the current quarterly statistics and data trends, including the recent rise in child deaths due to abuse and neglect.

Community focus groups, including both internal staff and community partners, culminated in the selection of the priorities for the upcoming SIP. In the area of Safety, the focused outcomes will be timely response to referrals and timely social worker visits. In the area of Permanency, the focused outcome for the SIP will be placement stability.

The end result of all of these endeavors will hopefully be to improve all of the outcome measures and thus improve the lives of the children and families that Sacramento County serves.

Priority outcome improvement areas and systemic factors for the upcoming SIP include:

Outcome Indicators

Safety

- Recurrence of Maltreatment
- Timely Response to Referrals
- Timely Social Work Visits

Permanency

- Placement Stability

Attachment A – Summary of Self Assessment

*SACRAMENTO COUNTY SELF ASSESSMENT
2009*

Systemic Factors

- Foster/Adoptive Parent Licensing, Recruitment, and Retention
- Quality Assurance

Attachment B– Summary of PQCR

Sacramento County Peer Quality Case Review

Conclusion and Summary

Conclusion and Summary

The PQCR process in Sacramento County proved to be a comprehensive and collaborative success for CWS and Probation. Both departments have gained insight on how to improve services for youth and families.

Sacramento County CWS and Probation are truly in debt to the peer interviewers, focus group participants, interviewees, the planning committee, and other PQCR participants for their insight, identification of trends, and recommendations that are echoed throughout this document. Information obtained through the PQCR validates and sheds further light on areas that both departments assumed were impacting placement stability. The PQCR has provided a venue that legitimizes the processes, practices, and initiatives that both departments have already begun and are in the process of implementing. Examples of a few processes, practices and initiatives that are being employed to impact placement stability include:

CWS

- Engaging youth and their parents to participate in placement decisions
- Encouraging the use of the Placement Support Unit and Kinship Unit social workers to provide expertise in finding and assessing appropriate placements.
- Supporting relative caregivers through the Kinship Support Services Program
- Continuing recruitment of resource parents in targeted areas.
- Increasing collaboration with community partners to provide after-care support and services in the community.
- Integrating the principles of Family to Family into everyday practice in all programs.
- Continuing Team Decision Making meetings as an integral part of placement decisions.
- Shifting to geographical caseload assignment to facilitate the development of relationships between the social workers and the community, and to facilitate the development of neighborhood resource expertise for the social workers.
- Creation of the Placement Improvement Workgroup. Consisting of supervisors, specialists, and planners, the workgroup is surveying the placement practices of other counties in order to make recommendations for improvements in Sacramento County's placement practices.
- Ensuring that all programs are provided with up-to-date placement data reports on a monthly basis.
- Providing quality assurance reviews that focus on practices that impact placement stability.

Attachment B– Summary of PQCR

Sacramento County Peer Quality Case Review

Conclusion and Summary

Probation

- Drafting a Probation Placement Unit policy and procedure manual.
- Providing training opportunities to inexperienced Placement Probation Officers.
- Continuously using encouragement and tools to engage youth and families.
- Engaging youth and families to give input on placement decisions.
- Conducting an internal review of Juvenile Probation Systems.

Sacramento County is committed to engaging, improving, and refreshing both CWS and Probation systems to deliver quality services to youth and families. As promising practices, barriers and challenges, and recommendations were identified (some contradicting one another), both departments acknowledge that this is the reflection of a small sample. Both departments understand that this provides indications of areas that may need a deeper look.

This report stands as a review that will be used to embark on the next three-year AB636 planning and implementation process. The overall information will be used as a benchmark in the area of placement stability. Sacramento County CWS and Probation are collaboratively devising a plan to deploy the information from this PQCR to all staff. Following deployment to staff and further analysis, the PQCR planning committee will use the report to contribute to the development of the Self-Assessment. The Self-Assessment process will incorporate trends and observations from the PQCR, current county outcomes, and staff and community partners' perceptions of services to youth and families in Sacramento County. Both the PQCR and Self Assessment will be used to create an effective and outcome driven improvement plan in the three-year Systems Improvement Plan, which will be submitted in May 2009.

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12

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	2. Increase worker retention	#Retention	3
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	4. Implement an automated service referral system	#AutomatedReferral	5
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	1. Communicate expectations 2. NetBooks 3. Monitoring tool completion 4. Consolidation of Investigations 5. Quality of assessments		
2B Timely Response to Referrals – 10 Day	7. Use SafeMeasures to monitor compliance		10
2C Timely Social Worker Visits with Child.			
C 4.1 Placement Stability 12 months or less	8. Increase the number of kin placements 1. TDMs at front end 2. Placement Unit	#KinPlace	11
C 1.4 Reentry to Foster Care	9. Strengthen aftercare supports to reunifying families 1. TDM before reunification 2. Aftercare template and training 3. TDM before reentry	#Aftercare	13
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System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12
Strengthen Infrastructure – Strategy 1

Outcome: Strengthen the CPS infrastructure		Strategy Rationale: Performance feedback is essential to develop a skilled work force.		
Strategy 1: Develop a performance evaluation system				
	Milestones	Timeline	Method of Measurement	Assigned
1.1	Select an appropriate performance evaluation system.	5/1/09	Decision made	Laura Coulthard
1.2	Create a policy/process/procedure for performance of performance evaluations	March 2010	Document posted	
1.3	Create PEP training for users	April 2009	Curriculum completed	Zeta Engel
1.4	Train staff and initiate PEP use	June 2012	Staff will have a PEP evaluation	Melinda Lake Kim Pearson Luis Villa
Discuss changes in identified systemic factors needed to further support the improvement goals. OCIT and DHHS IT will purchase and maintain the PEP personnel evaluation system.				
Describe educational/training needs. Staff training on PEP use will be needed.				
Identify roles of the other partners in achieving the improvement goals. Human Resources is vital to consult on competencies and goals for each job class, blending PEP into its performance evaluation system, and providing status reports.				
The Labor unions will be regularly informed of implementation process.				
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.				
None.				

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12
Strengthen Infrastructure – Strategy 2

Outcome: Strengthen the CPS infrastructure		Strategy Rationale: An experienced workforce can perform better. A stable workforce reduces case transfers due to staff vacancies which conserves worker time and client engagement. Note that the large number of layoffs in the last half of 2009 will artificially increase worker retention data.						
Strategy 2: Increase worker retention		Milestones		Timeline		Method of Measurement		Assigned
2.1 Develop workforce committee that will address retention, recognition, improving hiring practices and redesigning the social worker peer mentor program.				March 31, 2010		Existence of committee		Karen Parker
2.2 Each program will have a Peer Mentor program with standardized criteria, expectations, roles, and responsibilities for social workers and supervisors				January 2010		80% of new employees will have a peer mentor assigned for at least 3 months.		Karen Parker
2.3 Each program will have a standardized program specific training plan for all new staff/supervisors coming into the program.				1/1/2011		Retention Rate (see below)		Karen Parker
2.4 Establish an effective secondary trauma plan for staff.				December 2010		Plan Adopted		Karen Parker
Discuss changes in identified systemic factors needed to further support the improvement goals.								
NA								
Describe educational/training needs.								
NA								
Identify roles of the other partners in achieving the improvement goals.								
NA								
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.								
NA								
Associated Measurable Outcomes								
Increase worker retention ¹		2008	May-June 2009	July - December 2009	January - June 2010	July - December 2010	January - June 2011	January - June 2012
		13%		3%				
Target			≤6%	≤6%	≤6%	≤6%	≤8%	≤10%

¹ Chapter 13 on the Monthly Data Book.

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12

Strengthen Infrastructure – Strategy 3

Outcome: Strengthen the CPS infrastructure		Strategy Rationale: Staff need accessible, simple, up to date, and cross-linked written direction on how to perform their job. Revised policy/process/ procedures will standardize the work so the impact of new strategies can be better judged.		
Strategy 3: Reformat and consolidate existing policies, process, and procedures				
Milestones		Timeline	Method of Measurement	Assigned
3.1 Train project staff in information mapping		October 2010	Training Attended	Laura Williams
3.2 Test product with line ER staff		June 2009	Feed back session held	Laura Williams
3.3 Set up common electronic access file for all staff		June 2009	Presence of icon on computer desktop	Laura Williams
3.4 Rewrite policy/process/procedure		June 2012	Posted electronically on common drive	Laura Williams
3.5 Design and implement a process to ensure policies and procedures are continuously reviewed and updated		8/31/09	Posted electronically on common drive	Laura Williams
3.6 Design and implement a shortened policy/process/procedure approval process		12/31/10	Adopted by Executive Management Team	Laura Williams
Discuss changes in identified systemic factors needed to further support the improvement goals. Supervisors and managers should use these when answering questions and/or training staff.				
Describe educational/training needs. New policy/process/procedure will need to be incorporated into training.				
Identify roles of the other partners in achieving the improvement goals. UCD Training Center				
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None				

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12
Strengthen Infrastructure – Strategy 4

Outcome: Strengthen the CPS infrastructure		Strategy Rationale: Process automation will save social workers time and increase their efficiency.		
Strategy 4: Implement an automated system for short term counseling referrals for case participants		Milestones	Timeline	Method of Measurement
				Assigned
4.1. Implement an electronic (non-paper) service referral process that will be supported by clerical staff and CWS/CMS system.				
4.1.1 Develop an electronic services referral form.			12/31/09	Service referral in CWS and staff trained
4.1.2 Establish authorization and payment process with Fiscal			12/31/09	Functional process exists
4.1.3 Develop policy/process/procedure			12/31/09	Posted on-line
Discuss changes in identified systemic factors needed to further support the improvement goals.				
The organization must regularly review workload and workflow to ensure efficient use of resources.				
Describe educational/training needs.				
Training will be needed on new technology, new processes and info mapping.				
Identify roles of the other partners in achieving the improvement goals.				
Partners will participate on the Workforce Committee.				
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.				
None.				

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12

Strengthen Infrastructure – Strategy 5

Outcome: Strengthen the CPS infrastructure		Strategy Rationale: Use of data in decision making will strengthen the organizational capacity to make lasting, effective program changes.		
Strategy 5: Embed data analysis in management decisions				
	Milestones	Timeline	Method of Measurement	Assigned
5.1	Develop a process to implement and routinely review SIP strategies and outcomes	1/2/31/09	Adoption of Process	Laura Williams
5.2	Improve staff skills in data analysis			
	a) SafeMeasures for data monitoring via Safe Measures training : 5 sessions, each for a different program grouping.	March & April 2009	104 staff attended	Terry Clauser
	b) Data analysis and use of Berkeley web site for data monitoring via Chapin Hall Training	6/30/09-7/2/09	41 Attended	Terry Clauser
Discuss changes in identified systemic factors needed to further support the improvement goals. Not applicable.				
Describe educational/training needs. The Division has in-house resources to conduct logic model training.				
Identify roles of the other partners in achieving the improvement goals. None other than identified on specific work plans.				
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None				

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12

6. SDM SAFETY ASSESSMENTS

Outcome: Increase the timely completion of SDM Safety Assessments. Strategy 6: Safety assessments shall be done timely and correctly.		Strategy Rationale: SDM tools guide workers to assess child safety and risk.		
Milestones		Timeline	Method of Measurement	Assigned
6.1 Communicate performance expectations ² to staff: 6.1.1 Revise ER Investigation Policy, Process, and Procedure to include these expectations. 6.1.2 Supervisors, Program Managers, and Division Managers will routinely monitor staff compliance ³ .		6/30/09	Revised policy is posted on accessible drive	Laura Williams
6.2 Provide mechanism for staff to complete Safety Assessment while in the field. 6.2.1 Establish technology standards 6.2.2 Obtain remote access for field staff 8/3/09 24 Staff still need VPN 8/17/09 Telephone call to those still needing VPN		Ongoing	Announcement made	Laura Coulthard
6.2.3 Select technology 6.2.4 Determine amount needed 6.2.5 Secure funding 6.2.6 Receive technology. OCIT exception approval for purchase received 7/22/09. NetBooks ordered 8/12/09 8/26/09 NetBooks received		June 15, 2009	Publication of standards to vendors	Joni Edison
		September 30, 2009	95% of staff scheduled to receive NetBooks will have established remote computer access	Laura Williams
		July 31, 2009	Issue purchase order	Bambi Rethford
		July 31, 2009	Issue purchase order	Laura Coulthard
		June 30, 2009	Budget item approved by Board of Supervisors	Laura Coulthard
		9/30/09	Invoice	Amir Vaezinia
6.3 Modify technology 6.3.1 Reimage 6.3.2 Initialize technology 6.3.3 Deploy technology (done on flow basis since hardware needs 12 hour on line time to initialize) 6.3.3.1 Add to inventory		10/30/09	Successful test	Amir Vaezinia
		11/30/09	90% of allocated hardware ⁴ is deployed	Bambi Rethford Karen Habben

⁴ Use the lists to be submitted 7/27 for the count of allocated machines.

**System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12**

6. SDM SAFETY ASSESSMENTS

6.3.3.2 Train staff	11/30/09	90% of staff receiving hardware are trained	Karen Habben
6.3.3.3 Monitor that staff are using the NetBooks.	12/31/09	Monthly report of air time usage	Bambi Reithford
6.4 Monitor compliance with standard.			
6.4.1 Emergency Response Program managers and supervisors will attend program specific Safe Measures Training to learn how to create compliance reports. 104 out of 126 targeted staff ⁵ received training which is 82%	March and April 2009	80% of targeted staff will be trained.	Terry Clauser
6.4.2 Emergency Response Program managers and supervisors will routinely produce monitoring reports.	12/31/10	By report of Division Manager	Kim Pearson
6.4.3 Emergency Response Program managers and supervisors will use the monitoring reports to improve staff compliance.	12/31/10	Every ER office will have a monthly compliance rate of 95% or higher for rate for both completion and timely completion of Safety Assessments ⁶ .	Kim Pearson
6.5 Consolidate all referral investigation to Emergency Response programs.	December 31, 2009	99% of Emergency Response referrals will be handle by ER	Kim Pearson Melinda Lake Luis Villa
6.5.1 Meet and confer on consolidation Scheduled 9/17 with SEIU and 9/18 with UPE	September 30, 2009	Meeting held	Melinda Lake Kim Pearson Melinda Lake Kim Pearson
6.5.2 Implement in Family Reunification			
6.5.2.1 Immediate Response ER referrals for cases open in Family Reunification will be handled by Emergency Response.			
6.5.2.1.1 Refer to a joint Program Specific Workgroup for testing	October 31, 2009	Decision to Implement	
6.5.2.1.2 Full implementation	December 31, 2009	SafeMeasures	Melinda Lake Kim Pearson
6.5.2.2 10 day ER referrals for cases open cases in Family Reunification will be handled by Emergency Response.	March 31, 2010	SafeMeasures	Melinda Lake Kim Pearson
6.5.3 Implement in Permanency Services	May 31, 2010	SafeMeasures	Luis Villa Kim Pearson
6.5.4 Implement in Family Maintenance	July 31, 2010	SafeMeasures	Kim Pearson
6.5.5 Implement in Adoptions	September 30, 2010	SafeMeasures	Luis Villa Kim Pearson

⁵ Using the staff counts for the PEP strategy, there are 151 targeted staff minus 25 clerical supervisors and family service supervisors = 126 staff.

System Improvement Plan
System Improvement Plan Priorities for Fiscal Year 2009-10 through 2011-12

6. SDM SAFETY ASSESSMENTS

Discuss changes in identified systemic factors needed to further support the improvement goals.					
Revision of Policy/Process/Procedure to have Emergency Response conduct all investigations. Implementation of PEP					
Describe educational/training needs.					
Training session on common risk assessment areas designed and delivered. Advanced SDM risk assessment training. Design and deliver training session on Placement Unit.					
Identify roles of the other partners in achieving the improvement goals.					
Training: The University of California Davis Extension Northern Academy and Children's Research Center. Labor unions regarding consolidation of emergency response investigations in the ER program.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
None.					
Associated Measurable Outcomes					
SDM Completion Rate (SafeMeasures)	Actual	7/1/09	12/31/09	6/30/10	12/31/10
	Goal	79% ⁷	92%	94%	95%
SDM Timely Completion Rate (SafeMeasures)	Actual	76% ⁸		90%	
	Goal			95%	95%

⁷ Children's Research Center SafeMeasures Data. Sacramento County. SDM Investigation Compliance Summary for July 2009, SDM Safety Assessment Completion.. Retrieved 8/20/09 from Children's Research Center website. URL:

⁸ Children's Research Center SafeMeasures Data. Sacramento County. SDM Investigation Compliance Summary for July 2009, SDM Safety Assessment Time to Completion.. Retrieved 8/20/09 from Children's Research Center website. URL: . Note: Timely percentage is calculated using the number of completed assessments as the denominator.

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7. Monitor With SafeMeasures

Outcome: Increase timely response to 10 Day Referrals and increase timely social worker visits with child.		Strategy Rationale: Close monitoring of compliance will improve performance.			
Strategy 7: Monitor outcomes using SafeMeasures					
Milestones		Timeline	Method of Measurement		Assigned
7.1 Supervisors and Managers will routinely review SafeMeasures outcome data for response to 10 day referrals and timely social worker visits with child.		Ongoing	See Below		Luis Villa Kim Pearson Melinda Lake
Discuss changes in identified systemic factors needed to further support the improvement goals. Routine performance evaluations (see strategy 1) will provide concrete feedback to staff.					
Describe educational/training needs. None					
Identify roles of the other partners in achieving the improvement goals. None					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None.					
Associated Measurable Outcomes					
2B Timely Response to Referrals- 10 Day ¹⁰		10/1/08-12/31/08	July 2009 ⁹	July 2010	July 2011
Actual		79.5%	89.2%		
Goal				91.0%	93%
		12/08	Q2 2009 ¹¹	Q2 2010	Q2 2011
2C Timely Social Worker Visits with Child ¹²					
Actual		88.9%	93.2%		
Goal				94%	95%

⁹ Children's Research Center SafeMeasures Data. Sacramento County. AB 636 Measure 2C: Timely Social Worker Contacts. Retrieved 9/17/09 from Children's Research Center website. (URL: <https://www.safemeasures.org/ca/safemeasures.aspx>)

¹⁰ Needell, B., Webster, D., Amijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website

¹¹ Children's Research Center SafeMeasures Data. Sacramento County. AB 636 Measure 2B: Timely Response to Ten-day Referrals. Retrieved 9/17/09 from Children's Research Center website. (URL: <https://www.safemeasures.org/ca/safemeasures.aspx>)

¹² Needell, B., Webster, D., Amijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website

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8. INCREASE PLACEMENT STABILITY

Outcome: Increase Placement Stability		Strategy Rationale:							
Research supports that relative placements and TDMs increase stability and reduce reentry. A centralized placement unit will increase the opportunity to place with kin within 23 hours of removal, thus avoid a shelter placement.									
Strategy 8: Increase the number of kin placements.		Milestones	Timeline	Method of Measurement	Assigned				
8.1. Hold TDM at the time of initial removal. 8.1.1 Complete test phase as required by the meet and confer			11/1/09	Management decision	Kim Pearson				
8.1.2 Expect monthly increases in the number of TDMs held before a child was removed.			1/1/10	See below					
8.2. Implement a centralized placement unit ¹³			1/1/10	Existence of the unit.	Luis Villa				
Discuss changes in identified systemic factors needed to further support the improvement goals. Reallocate staff to support the centralized placement process and capacity for kinship assessments.									
Describe educational/training needs. Initial and on-going training on TDMs and how to use the centralized placement process.									
Identify roles of the other partners in achieving the improvement goals. Partners will continue to support and participate in TDMs.									
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. Regulatory and statutory changes are needed relating to waivers in order to expand the ability to increase relative placements.									
Associated Measurable Outcomes									
Percent of eligible children who had a TDM prior to foster care placement ¹⁴ (new SafeMeasures)		Actual	6/30/09	12/31/09	6/30/10	12/31/10	6/30/11	12/31/11	6/30/12
		Goal							
Placement Stability for Children in Care Between 8 days and 12 months C4.1		Actual	1/1/08-12/31/08	1/1/09-12/31/09	1/1/10-12/31/10	1/1/11-12/31/11	1/1/10-6/30/10	7/1/10-12/31/10	
		Goal	78.5% ¹⁵ (1823/2323)	80%	85%	90%	90%	90%	90%

¹³ The Placement Unit will only operate during business hours.

¹⁴ Because about 33% of families are removed goal will be 60%. The Average number of non-LE family petitions is 94 for January –June 2009. In this same time period, an average of 7 LE family petitions were dismissed at intake.

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8. INCREASE PLACEMENT STABILITY

Percentage of Children at Placement Entry who are placed with		1/1/08-12/31/08	1/1/09 – 12/31/09	1/1/10 - 12/31/10	1/1/11 – 12/31/11
	Actual	9.0% ¹⁶ (223 kids)			
Percentage of children Placed with Kin (Caseload) (CSSR report).	Goal		11.2% (278 kids) 1/1/10	13.5% (334 kids) 1/1/11	18% (446 kids) 1/1/12
	Actual	27.4% (1113 out of 4065) ¹⁷			
	Goal		30.1%	32.9%	35.6%

¹⁶ Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website
for the period 1/1/08 – 12/31/08.

¹⁷ Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website
for the period 1/1/08 – 12/31/08.

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9. REDUCE RE-ENTRIES

Outcome: Reduce Reentries to Placement	Strategy Rationale: Implementation of strong aftercare plans will help families maintain the changes they have made during reunification. Timely completion of the SDM Family Strengths and Needs Assessment will shape a case plan that is better targeted to successful and lasting reunification, thus reducing reentries. Timely completion of the SDM Risk Reassessment tool will lead to stable reunification.				
Strategy 9: Strengthen aftercare supports to reunifying families	Milestones	Timeline	Method of Measurement	Assigned	
9.1 Hold TDM within 8 weeks before reunification to develop an aftercare plan.		March 2010	See Below	Melinda Lake	
9.2 Develop aftercare plan template elements and provide training to staff.		March 2010	Existence of template and training held.	Melinda Lake	
9.3 Hold a TDM prior to reentry to foster care		January 2010	See Placement Stability strategy for detail.	Kim Pearson	
Discuss changes in identified systemic factors needed to further support the improvement goals. Reallocate staff to support the centralized placement process and capacity for kinship assessments.					
Describe educational/training needs. Initial and on-going training on TDMs and how to use the centralized placement process.					
Identify roles of the other partners in achieving the improvement goals. Partners will continue to support and participate in TDMs.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. Regulatory and statutory changes are needed relating to waivers in order to expand the ability to increase relative placements.					
Associated Measurable Outcomes					
Percent of reunified children who had a TDM within 2 months of reunification (business objects report)	Actual	6/30/09	12/31/09	6/30/10	12/31/10
	Goal				6/30/11
					12/31/11
					6/30/12
					80%

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9. REDUCE RE-ENTRIES

C 1.4 Reentry following reunification 14% 7/1/07 -12/31-07 or 220 out of 1572, 18/month.	Actual	1/1/07-12/31/07 14% ¹⁸ (220/1572)	1/1/08-12/31/08	1/1/09-12/31/09	1/1/10-12/31/10	1/1/011-12/31/11	1/1/12-12/31/12	1/1/13-12/31/13
	Goal			13.2%	12.3%	11.5%	10.7%	9.9% ¹⁹ (156/1572)
Percent of SDM Family Strengths and Need Assessment Completed Timely (SafeMeasures)	Actual	7/20/09 94.9% ²⁰	July 2010	July 2011				
	Goal		97%	97%				
Percentage of Risk Reassessment Completed Timely (SafeMeasures)	Actual	7/20/09 20.4% ²¹	July 2010	July 2011				
	Goal		45%	55%				

¹⁸ Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmermann, K., Lou, C., & Peng, C. (2009) Child Welfare Report for California. Retrieved 8/20/09 from University of California at Berkeley Center for Social Services website http://cssr.berkeley.edu/uch_childwelfare/CIM4.aspx for the period 1/1/08 – 12/31/08.

¹⁹ National Standard. = 9.9 %. California average for 1/1/07-12/31/07 = 11.6%.

²⁰ Children's Research Center SafeMeasures Data. Sacramento County, SDM Measures for July 2009, SDM Initial Family Strengths and Needs Assessment Time to Completion. Retrieved 8/20/09 from Children's Research Center website. URL: .

²¹ Children's Research Center SafeMeasures Data. Sacramento County, SDM Measures for July 2009, SDM Risk Reassessment Timeliness. Retrieved 8/20/09 from Children's Research Center website.

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 INCREASE PLACEMENT STABILITY

Improvement Goal 1.0 Improve outcomes for youth as it relates to transition.			
Strategy 1: Ensure minors receive the necessary services for a successful transition out of Foster Care.		Strategy Rationale: Outcomes will improve by ensuring proper service. It prepares the minor for adulthood and reduces recidivism.	
Milestones		Timeframes	Method of Measurement
1.1: Enhance collaboration with providers and the minors to create a transition plan.			
1.2: Enhance collaboration with Independent Living Program (ILP).			
1.3: Develop and Implement ILP services at Sacramento Assessment & Treatment Center (SATC).		March, 2010	
1.4: Standardize referral procedure for transitional services.		March 2011 ongoing	Review each Permanency Planning Hearing report and case plans which will document minor's transition services, document procurement, and participation.
1.5: Identify and utilize programs willing to provide quality transitional services.		March 2010	
1.6: Training placement staff to access transitional services for probation youth			
1.7: Develop and assist probation minors with procurement of necessary documents. i.e.: birth certificates, social security cards, health passports, etc....			
1.8: Increase engagement of minors and care providers in transitional activities.			

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INCREASE PLACEMENT STABILITY

Strategy 2: Increase family engagement through increased face to face family contact.	Strategy Rationale: Outcomes will improve for minors with consistent and frequent family contact.		
Milestones	Timeframes	Method of Measurement	Assigned
2.1: Determine an appropriate long term care giver through a comprehensive Assessment. 2.2 Sustain support plans using the case plan as a tool to address the minor's and his/her families' needs. 2.3: Explore family finding efforts, within budgetary constraints. 2.4: Develop protocol for family finding (locate potential family members or long term care giver for permanency)	September 2009 		

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 INCREASE PLACEMENT STABILITY

Strategy 3: The use of Training, Skill Building, and Evidence Based Practices. Provide Placement staff with professional skills in order to provide a greater level of stability, safety, and permanency or placement.	Strategy Rationale: Outcomes will improve for minors with professionally trained Placement officers who are trained in services that respond to the unique needs of minors and their families.		
Milestones	Timeframes	Method of Measurement	Assigned
3.1: Identify training that is placement specific 3.2: Increase training beyond STC requirements, including local, state, and national conferences as related to placement services. 3.3: Train Placement officers to handle the technical complexity of managing Placement cases. 3.4: Legal updates and Literature review for Placement officers. Create and maintain a placement specific resource library. 3.5: New Placement officer training and cross training other Probation Divisions regarding placement.	September, 2009 To ongoing September 2009	Insure Placement officers attend placement specific training. Review training records quarterly. Maintaining current updated literature and resources for placement officers	Placement Supervisor s
Describe any additional systemic factors needing to be addressed that support the improvement plan goals. Funding is needed for additional support staff relevant to Placement-Youth to include Training, Family Finding, State and Federal Grant Finding. Additional support staff would include IT Support, Database Research, and Project Manager to identify unique placement needs and assist in managing large and time sensitive projects.			
Describe educational/training needs (including technical assistance) to achieve the improvement goals. Need funding to attend placement specific training, conferences, and fairs. Develop training and incentives to engage families; provide social life skills parenting classes.			

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INCREASE PLACEMENT STABILITY

Identify roles of the other partners in achieving the improvement goals.

Collaborate with CPS and ILP Services for Probation Placement youth. Collaborate with UC Berkeley for statistic outcomes for Placement. Enhance relationship with UC Davis Northern Training Academy for mandated training, technical assistance, resource development and networking. Identify, review and seek approval of Out-of-State programs.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.

Need State liaison to communicate pending legislation regarding foster care. The liaison would ensure officers were updated on current and pending state regulations that impact placement. Need access to different databases regulated by State, i.e. Medi-Cal, CWS and SSI.